## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10173154

(Column 1) (Column 2)								SMALL ENTITY			OTHER THAN										
F	OTAL CLAIMS		(Column 1)		(COIL	Column 2)		TYPE [	J 	OR		ENTITY									
TOTAL CLAIMS			7			· ·	ı	RATE	FEE	վ ։	RATE	FEE									
FOR			NUMBER FILED		NUME	BER EXTRA		BASIC FE	385.00	OR	BASIC FEE	770.00									
TO	OTAL CHARGE	ABLE CLAIMS	9 mil	nus 20=	*	0		X\$ 9=	1	OR	X\$18=	ļ ·									
INI	DEPENDENT C	CLAIMS	m	inus 3 =	. 8			X43=		OR	X86=										
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=										
* If the difference in column 1 is less than zero, enter "0" in column						column 2	Ĺ	TOTAL		OR	TOTAL	770									
CLAIMS AS AMENDED - PART II									<del></del>		OTHER	THAN									
_		(Column 1)	(Column 2)			(Column 3)		SMALL	ENTITY	OR	SMALL										
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE									
AMENDMENT A	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=										
	Independent	*	Minus	***	<u> </u>	=		X43=		OR	X86=										
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=										
·								TOTAL			TOTAL ADDIT. FEE										
ADDIT. FEE																					
AMENDMENT B	<del></del>	CLAIMS REMAINING		HIGHE	ST		Г		ADDI-	l !		ADDI-									
		AFTER AMENDMENT		NUMB PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL									
	Total	*	Minus	**	٠	=		X\$ 9=		OR	X\$18=										
	Ind pendent	*	Minus	***		=	┢	X43=		l	X86=										
۷	FIRST PRESENTATION OF MU		LTIPLE DEPENDENT C		CLAIM			7,10_		OR		<u> </u>									
										OR	+290=										
										OR ,	TOTAL ADDIT. FEE										
(Column 1) (Column 2) (Column 3)												·									
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE									
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=										
	Independent	*	Minus	***		=	上	X43=		.	X86=										
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						┢	<del>74</del> 5-	·	OR	X00=										
* If	* If the ntry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=										
** H	the "Highest Nur	nber Previously Pai	id For IN THIS	SPACE is I	ess than	20, enter "20."	AD	TOTAL DIT. FEE		OR A	TOTAL DDIT. FEE										
T	he *Highest Num	ber Previously Paid	For" (Total or	Independen	t) is the l	nighest number	found	in the app	ropriate box	***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											